| UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORKX |   | USDC SDNY DOCUMENT ELECTRONICALLY FILED DOC #:_ DATE FILED: 10/21/2020  |
|---|---|---|
|   | STATES OF AMERICA   | DATE FILED: 10/21/2020  |
|   | -V-   | WAIVER OF RIGHT TO BE PRESENT AT CRIMINAL PROCEEDING  |
| Alejano   | dro Paulino , Defendant   |   |
| Check Pr  | oceeding that Applies   |   |
| E   | Entry of Plea of Guilty   |   |
| a<br>C<br>C<br>a<br>V<br>a<br>a<br>t<br>t                   | ettorney about those charges. I charges. I understand I have a rigostrict of New York to enter my palso aware that the public health with travel and restricted access to attorney. By signing this document appear in person before the judge to advise the court that I willingly as I enter my plea so long as the for participate in the proceeding and the | ged with violations of federal law. I have consulted with my have decided that I wish to enter a plea of guilty to certain that to appear before a judge in a courtroom in the Southern lea of guilty and to have my attorney beside me as I do. I am emergency created by the COVID-19 pandemic has interfered the federal courthouse. I have discussed these issues with my t, I wish to advise the court that I willingly give up my right to to enter a plea of guilty. By signing this document, I also wish give up any right I might have to have my attorney next to me ollowing conditions are met. I want my attorney to be able to o be able to speak on my behalf during the proceeding. I also with my attorney at any time during the proceeding if I wish to |
| Date:   | Print Name  | Signature of Defendant  |

X Sentence

I understand that I have a right to appear before a judge in a courtroom in the Southern District of New York at the time of my sentence and to speak directly in that courtroom to the judge who will sentence me. I am also aware that the public health emergency created by the COVID-19 pandemic has interfered with travel and restricted access to the federal courthouse. I do not wish to wait until the end of this emergency to be sentenced. I have discussed these issues with my attorney and willingly give up my right to be present, at the time my sentence is imposed, in the courtroom with my attorney and the judge who will impose that sentence. By signing this document, I wish to advise the court that I willingly give up my right to appear in a courtroom in the Southern District of New York for my sentencing proceeding as well as my right to have my attorney next to me at the time of sentencing on the following conditions. I want my attorney to

be able to participate in the proceeding and to be able to speak on my behalf at the proceeding. I also want the ability to speak privately with my attorney at any time during the proceeding if I wish to do so.

Date: October 14, 2020 Alejandro Paulino /s/ Alejandro Paulino Signature of Defendant

I hereby affirm that I am aware of my obligation to discuss with my client the charges against my client, my client's rights to attend and participate in the criminal proceedings encompassed by this waiver, and this waiver and consent form. I affirm that my client knowingly and voluntarily consents to the proceedings being held with my client and me both participating remotely.

Date: October 14, 2020 Sarah M. Sacks
Print Name
Sarah W. Sacks
Signature of Defense Counsel

Addendum for a defendant who requires services of an interpreter:

I used the services of an interpreter to discuss these issues with the defendant. The interpreter also translated this document, in its entirety, to the defendant before the defendant signed it. The interpreter's name is: Mayerlin Ulerio .

Date: October 14, 2020 Sarah M. Sacks

Signature of Defense Counsel

Accepted: Signature of Judge

Date: 10/21/2020